## REQUEST FOR BIRTH CERTIFICATE

TOWN & CITY CLERK 27 W. Main Street New Britain, CT 06051 (860) 826-3344

## I AM APPLYING FOR THE BIRTH CERTIFICATE OF:

Full Birth Name:			
Date of Birth:			Place of Birth:
			Mother's
Mother's Full Maiden Name:			Birthplace: Father's
Father's Full Name:			Birthplace:
PLEASE STATE THE SIZE OF BIRTH CERTIFICATE REQUESTED:			
Long Form	Fee: \$20.00	Wallet Size Fee: \$15.00	(Personal Checks, Credit or Debit cards are not accepted)
My relationship to the <i>above</i> person is:			
	Myself	My Child	*My Grandchild/Grandparent 🗌
	<b>*</b> My Parent □	*My Spouse 🗌	A person whom I legally represent  (Please submit documentation)
THE FOLLOWING MUST BE INCLUDED BY THE PERSON MAKING THIS REQUEST			
<ul> <li>Photo identification (drivers license, etc.). <u>If unavailable</u> then include originals or photo copies of any 2 of the following:         <ul> <li>Social Security Card</li> <li>Auto Registration</li> <li>Checking account deposit slip stating name and address</li> </ul> </li> <li>Photo identification (drivers license, etc.). <u>If unavailable</u> then include originals or photo copies of any 2 of the following:         <ul> <li>Written verification of ID from employer</li> <li>Copy of Utility bill showing name and address</li> <li>Voter Registration Card</li> </ul> </li> </ul>			
2. * If the relationship is other than my child or myself you must provide documentation proving the relationship.			
Please Note: All of the above requirements are mandated by State Statutes.			
<b></b>			
Your Name:			Phone #
Address:			Purpose for requesting this birth certificate:
City, State and	d Zip Code:		
I DECLARE UNDER PENALTIES OF FALSE STATEMENT THAT THE ABOVE STATEMENTS AND INFORMATION ARE TRUE AND CORRECT.			
Signature:			Date:
For Office Use Only:			
P.C.#			
EVRS System effective 6/10/02			